



FEE TRANSMITTAL FOR FY 2004

(FY 2004 Begins 10/01/2003)

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known:

Application No. 09/751,792
 Filing Date December 29, 2000
 First Named Inventor Kent Wendorf
 Examiner Name Vincent, David Robert
 Art Unit 2661
 Attorney Docket No. 81862P239

RECEIVED

AUG 03 2004

Applicant claims small entity status. See 37 CFR 1.27.

Technology Center 2600

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order Other None
- Deposit Account
 Deposit Account Number : 02-2666
 Deposit Account Name: _____
- The Director is Authorized to do the following with respect to the above-identified Deposit Account:
 Charge fee(s) indicated below.
 Credit any overpayments.
 Charge any additional fees during the pendency of this application.
 Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
 Charge fee(s) indicated below except for the filing fee.

FEE CALCULATION

1. BASIC FILING FEE

| <u>Large Entity</u> | | <u>Small Entity</u> | | <u>Fee Description</u> | <u>Fee Paid</u> |
|---------------------|------|---------------------|------|------------------------------------|-----------------|
| Fee | Fee | Fee | Fee | | |
| Code | (\$) | Code | (\$) | Utility application filing fee | _____ |
| 1001 | 770 | 2001 | 385 | Design application filing fee | _____ |
| 1002 | 340 | 2002 | 170 | Plant filing fee | _____ |
| 1003 | 530 | 2003 | 265 | Reissue filing fee | _____ |
| 1004 | 770 | 2004 | 385 | Provisional application filing fee | _____ |
| 1005 | 160 | 2005 | 80 | | |

SUBTOTAL (1) \$ 0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

| | | <u>Extra Claims</u> | <u>Fee from below</u> | <u>Fee Paid</u> |
|--------------------|-------|---------------------|-----------------------|-----------------|
| Total Claims | _____ | - 20** = | X | = |
| Independent Claims | _____ | - 3** = | X | = |
| Multiple Dependent | _____ | | | |

**Or number previously paid, if greater; For Reissues, see below.

| <u>Large Entity</u> | | <u>Small Entity</u> | | <u>Fee Description</u> |
|---------------------|------|---------------------|------|---|
| Fee | Fee | Fee | Fee | |
| Code | (\$) | Code | (\$) | Claims in excess of 20 |
| 1202 | 18 | 2202 | 9 | Independent claims in excess of 3 |
| 1201 | 86 | 2201 | 43 | Multiple dependent claim, if not paid |
| 1203 | 290 | 2203 | 145 | **Reissue independent claims over original patent |
| 1204 | 86 | 2204 | 43 | **Reissue claims in excess of 20 and over original patent |
| 1205 | 18 | 2205 | 9 | |

SUBTOTAL (2) \$ 0.00

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| <u>Large Entity</u> | <u>Small Entity</u> | <u>Fee Description</u> | <u>Fee Paid</u> |
|-------------------------------|---------------------|------------------------|-----------------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1051 | 130 | 2051 | 65 |
| 1052 | 50 | 2052 | 25 |
| 1053 | 130 | 1053 | 130 |
| 1812 | 2,520 | 1812 | 2,520 |
| 1813 | 8,800 | 1813 | 8,800 |
| 1804 | 920* | 1804 | 920* |
| 1805 | 1,840* | 1805 | 1,840* |
| 1251 | 110 | 2251 | 55 |
| 1252 | 420 | 2252 | 210 |
| 1253 | 950 | 2253 | 475 |
| 1254 | 1,480 | 2254 | 740 |
| 1255 | 2,010 | 2255 | 1,005 |
| 1401 | 330 | 2401 | 165 |
| 1402 | 330 | 2402 | 165 |
| 1403 | 290 | 2403 | 145 |
| 1451 | 1,510 | 1451 | 1,510 |
| 1452 | 110 | 2452 | 55 |
| 1453 | 1,330 | 2453 | 665 |
| 1501 | 1,330 | 2501 | 665 |
| 1502 | 480 | 2502 | 240 |
| 1503 | 640 | 2503 | 320 |
| 1460 | 130 | 1460 | 130 |
| 1807 | 50 | 1807 | 50 |
| 1806 | 180 | 1806 | 180 |
| 8021 | 40 | 8021 | 40 |
| 1809 | 770 | 2809 | 385 |
| 1814 | 110 | 2814 | 55 |
| 1810 | 770 | 2810 | 385 |
| 1801 | 770 | 2801 | 385 |
| 1802 | 900 | 1802 | 900 |
| 1504 | 300 | 1504 | 300 |
| 1505 | 300 | 1505 | 300 |
| 1803 | 130 | 1803 | 130 |
| 1808 | 130 | 1808 | 130 |
| 1454 | 1,330 | 1454 | 1,330 |
| Other fee (specify) _____ | | | |
| Other fee (specify) _____ | | | |
| SUBTOTAL (3) \$ 180.00 | | | |

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Lester J. Vincent

Signature: Lester J. Vincent Date: July 27, 2004

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